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MN013801. Navy Medicine "Steams to Assist," Honors Heroes
By Jan Davis, Bureau of Medicine and Surgery

Washington, DC - Navy Medicine hauled down its charlie-golf-one colors yesterday (Sept. 27) and hoisted the charlie-papa flags, signaling a change in Navy Medicine's "standing by, ready to assist" mode to the more active "steaming to assist."

Navy Surgeon General VADM Michael L. Cowan, MC, who spoke at the informal color shifting ceremony, said this change comes at a time when Navy Medicine has proven itself to be on the front line of world events, actively assisting.

"We're no longer standing by to help when a Sailor or Marine is sick or injured," said Cowan in his remarks during the ceremony. "We're out in front of the problem, providing preventive care, promoting wellness and anticipating crises before they occur."

Cowan used the recent terrorist attacks as an example of a more proactive Navy Medicine.

"After the terrorists struck the Pentagon, our Navy Medicine people were among the first to respond," said Cowan. "They were there, immediately, assisting with the injured."

Former Navy Surgeon General VADM James A. Zimble, MC, who retired from the Navy in 1991, introduced the charlie-golf-one signal flag message in 1987 shortly after he took office. He attended the ceremony and was presented with the old signal flags.

Honored at the ceremony were Navy Medicine personnel who were on the front line of the Pentagon terrorist attack and who responded immediately after. They are:

- CAPT Stephen Frost, MC, and CAPT John Feerick, MC, both Naval Reservists on active duty, who were at the Pentagon when they felt a rumble, and then learned of the attack. They ran to the crash site, and appeared to be the first medical personnel to arrive. When officials screamed warnings of another plane, neither left their burned or injured victims. As the hours passed, they also began treating fire fighters and other rescue personnel. They stayed all night and into the next day.

"I watched the unbelievable personal sacrifice of thousands of people at that site and, as horrible as it was, I will always be honored to have been a part of it," said Feerick.

- HMC Warren Terrell, who was at the Navy Annex when the plane hit. Terrell set up a triage area to aid burn and smoke inhalation victims in a nearby Marine Corps gymnasium.

- CAPT Jane Viera, CHC, BUMED's chaplain, raced to the Pentagon after the attack and spent the next two days providing last rites to the dead and dying, and offering spiritual comfort to families of victims.

- CDR John Knowles, MSC, and LTJG Johanna Mills, NC, of National Naval Medical Center Bethesda's Special Psychiatric Rapid Intervention Team, or SPRINT, who continue to work tirelessly with their team at a location near the Pentagon, providing stress management assistance and one-on-one counseling. They aided an estimated 1,500 individuals during the last two weeks.

Cowan also praised the men and women aboard USNS Comfort who continue to provide care and respite to New York City's to rescue and recovery workers, firefighters and policemen.

The idea of changing the signal flags and Navy motto to the more active "steaming to assist" came from LCDR Dick Turner, NC, while he was serving at U.S. Naval Hospital Guam.

The charlie-papa signal flags will be flown at all Navy Medicine commands world-wide beginning Friday, Sept. 28.

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MN013802. Navy Asks Blood Donors to Pace Their Giving

By Jan Davis, Bureau of Medicine and Surgery

Washington, DC - Active duty personnel, family members, retirees, DoD civilians, and many others who come to Navy military treatment facilities to give blood may get a surprise request when they arrive:

"Can you come back in a few weeks?"

Thousands of selfless Navy and Marine Corps retirees, family members, active duty members, and civilians have waited for hours in the wake of the terrorist attacks. The Armed Forces Blood Center at Bethesda, Md., collected 300 units in the day following the event. Naval Medical Center Portsmouth, Va., wasn't far behind with 265. That's many times the normal amount that would be donated, and the centers were gratified to get the much-needed blood.

But according to Navy Blood Program Director, CDR Brenda Bartley, MSC, donors at most Navy blood centers may be asked to come back later to ensure there's a steady supply of blood available if it's needed.

"Individuals who donate need to wait 56 days before they can donate again," said Bartley. "And the fresh blood can be used for only 42 days after it's drawn. So we want to make sure we don't deplete our valuable donor supply."

Bartley does have some concern that those who are asked to come back later might not return.

"It's hard to turn people away," she said. "But I hope people will understand that we're asking them to keep their blood safe in their circulatory systems until we ask them to please help again. We'll need it just as much then as we did earlier."

The Navy and Marine Corps is expected to call on donors soon to help replace frozen blood that is in storage aboard some ships, including the hospital ships USNS Comfort and Mercy, and forward deployed overseas. Currently, the frozen blood in storage is only usable for 24 hours after it is thawed. New technology will make frozen blood usable for up to two weeks after thawing.

"The new technology will allow us to improve our readiness," said Bartley. "And that's key to force health protection.

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MN013803. Comfort's SPRINT Comforts Rescuers

By JO2 Ellen Maurer, USNS Comfort

New York - More than two weeks have passed since the Sept. 11 terrorist attack on the World Trade Center and the Pentagon.

For those whose work buildings have been left standing and whose loved ones are still alive, transitioning back to business as usual will seem like the next logical step, moving on and showing the world the strength of a great nation.

For others, like the disaster relief workers who have been tasked with the difficult job of sifting through a mountain of mass destruction at the site where the towers and other surrounding buildings once stood, there is no moving on yet. There are only weeks of work ahead and thousands of individuals who need to be found and finally brought home.

"If you've only seen the area on television, you really can't understand its full impact. It is like the difference in looking at a picture of the Grand Canyon and actually being there," explained CAPT Ralph Bally, MSC, a psychologist.

Bally is one of 11 members belonging to the Navy's special psychiatric rapid intervention team, or SPRINT, aboard USNS Comfort (T-AH 20).

The crewmembers aboard are lending logistical support, like healthy meals, hot showers, clean clothes and a warm place to sleep, to the disaster relief workers.

Bally said Comfort's mission of caring is furthered even more by the SPRINT's efforts. While the crew gets the disaster relief workers physically ready for another day at "ground zero," the SPRINT prepares them mentally.

"We are trained to teach victims of trauma how to normalize their situation," said Bally. "Not that we can normalize what happened, because what happened is just pure craziness, but we can explain to the disaster relief workers that some of the emotional things they are going through are normal and that, eventually, they will feel better."

SPRINT were initially designed to be first response mental health groups that deploy to the scene of traumatic events affecting large groups of people. But Comfort's team is operating differently, making themselves available to the disaster relief workers as they come for a break from the disaster scene.

"Essentially, everyone aboard the ship is really participating like a member of a SPRINT," explains Bally. "We are all taking care of the relief workers' basic needs for food, water and shelter, which are the number one things they need to carry on with their job.

"The crew members are also spending a lot of time talking with the relief workers while they are aboard, which is, in most cases, what they really want - someone to talk to."

LT Dave Stroud, CHC, a chaplain and a member of Comfort's SPRINT, said the team has organized a daily support meeting on board the ship for any interested disaster relief workers.

They have also been handing out flyers at the disaster site titled "Taking Care of Yourself," which lists typical reactions to trauma and hints to dealing with the emotional stress.

"None of us can make this all go away for anyone," said Stroud, "but while they're on Comfort, they can get away from the site and remember that they still have families, loved ones and a life that they will eventually be able to get back to."

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MN013804. Bethesda Nurses Honor Former WW II POW Nurse
By Kevin Sforza, National Naval Medical Center

Bethesda, Md. - Nurse Corps members from NNMHC honored one of their own at a ceremony for LCDR Dorothy Still Danner, NC, a World War II POW who died recently.

Danner was one of the "Sacred Eleven" nurses who were taken prisoner and sent to Lose Banos in the Philippines. They established an infirmary although they had virtually no medicine or supplies and continued to nurse the sick until they were liberated.

Danner's remains were interred in Arlington National Cemetery earlier on Aug. 31. Later that day, ENS Sarah Lafave, LTJG Lori Thomas, LT Amy Noyes, and LCDR Vicki Edgar, all Nurse Corps members, served on the Flag Detail during a ceremony honoring Danner, who was a WWII POW held by the Japanese from Jan. 1, 1942, through Feb. 23, 1945.

At the end of the ceremony, Edgar presented the flag to Martin Danner, youngest son of Dorothy's three children.

"I had a chance to speak with Martin and he said his mother being buried here gave the family a big sense of closure since the Navy was such a big part of her life," said Noyes.

Danner went on to write a book about her experiences, "What a Way to Spend a War."

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MN013805. Hospital Remembers Fallen Comrades
By Carlo Cariño, Naval Forces Marianas

Guam - Support for prisoners of war and prayers for those missing in action, both old and new, weighed on the staff of the U.S. Naval Hospital Guam in the early morning of Sept. 21 as they held a ceremony honoring POW-MIA Day.

"Today, we remember all those who died or are missing in action in the service of our country," said CAPT Susan Widhalm, NC, Guam's executive officer. "This year, as a result of recent events, we have a whole new group of people to remember who died or are missing in action in the service of their country and in the war on terrorism."

The ceremony centered on the raising of the POW-MIA flag above hospital grounds. HM3 Monique Rodriquez, HM2 Tomora Holland and HM3 Sara Matson performed the somber task of raising the black-and-white flag into the gray sky along with the U.S. Flag and the hospital's command flag.

When the flag was raised, the assembly observed a moment of silence for those who remain lost.

Rodriquez said the hospital's participation in observing the POW-MIA day was important.

"It's for all the people who actually defend and support our country," she explained. "It's important for us to recognize their cause and how they represent our nation."

Holland said that the full impact of the day was strong because of the Sept. 11 terrorist attacks in the U.S.

"I was thinking about how fitting it was in lieu of what happened back home," she said. "These type of things remind us of how important it is to remember those who got us here in the first place."

Matson said the ceremony was comforting for those who have to deal with the recent events.

"It's definitely helpful," she said. "I had a cousin who was killed at the World Trade Center. So it helped a lot."

In addition to the ceremony, the hospital also had a display on its quarterdeck that honored POW-MIAs - an empty dinner setting rendering

missing man table honors.

"The table is set for one, but there are many who sit in this chair," Widhalm said. "This table provides a way to tell us that members of our profession who we call brothers are not with us this morning."

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MN013806. Family Doc Awarded Prestigious Teaching Honor

Bremerton, WA - LCDR Maureen Padden, MC, a family physician who teaches at both Naval Hospital Bremerton and Madigan Army Medical Center in Tacoma, will be honored by the American Academy of Family Physicians Foundation for her commitment to education in the field of family medicine.

Dr. Padden was selected to receive the 2001 Pfizer/Parke-Davis Teacher Development Award based on her scholastic achievement, leadership qualities and ongoing dedication to family medicine. She will be recognized for this achievement during the AAFP Fellowship Convocation, Oct. 5 in Atlanta, GA.

"We are pleased that Pfizer is committed to making such prestigious awards available to our members," said William H. Coleman, M.D., Ph.D., AAFP/F President. "This program helps to recognize dedication and mentorship among family physicians such as Dr. Padden. Her accomplishments go beyond her professional successes with an impressive array of community volunteer activities as well."

The \$2,000 award promotes interest in the part-time teaching of family medicine after residency and provides funding for each recipient to attend the academy's annual Scientific Assembly, the AAFP's largest meeting for continuing education.

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MN013807. President to Nominate Winkenwerder For Health Affairs

The President announced he intends to nominate William Winkenwerder Jr., to be Assistant Secretary of Defense for Health Affairs.

Currently a health care consultant, Winkenwerder was previously Vice Chairman and Executive Vice President of Health Care Services of Blue Cross Blue Shield of Massachusetts. From 1996 to 1998, he was Associate Vice President for Health Affairs and Vice President of Emory Health Care at Emory University, and from 1992 to 1995, Winkenwerder was Vice President and Chief Medical Officer for Southern Operations of Prudential Healthcare. He served with Kaiser Permanente from 1988 to 1992 first as the director of quality assurance and then as associate medical director, and from 1987 to 1988, he served as special assistant to the administrator of the health care financing administration.

A resident of Massachusetts, Winkenwerder is a graduate of Davidson College, the University of North Carolina School of Medicine and the Wharton School of Business at the University of Pennsylvania.

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MN013808. Defense of Freedom Medal Unveiled

Secretary of Defense Donald H. Rumsfeld announced the creation of the Defense of Freedom medal to honor civilian employees of the Department of Defense injured or killed in the line of duty.

The Defense of Freedom medal will be the civilian equivalent of the military's Purple Heart. The first recipients to be honored will be those Defense Department civilians injured or killed recently as a result of the terrorist attack on the Pentagon.

At the discretion of the Secretary of Defense, the medal may be awarded to non-Defense employees, such as contractors, based on their involvement in Department of Defense activities.

A picture of the medal is at

www.defenselink.mil/news/Sep2001/010927-D-6570C-001.jpg.

"This medal acknowledges civilian employees of the Department of Defense and other civilians in service to the Department of Defense who are killed or injured while on duty," said Charles S. Abell, assistant secretary of Defense for Force Management Policy. "It reinforces the total force concept that makes our nation so strong."

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MN013809. Called to Active Duty? TRICARE Has Your Family Covered
By Army Sgt. 1st Class Kathleen T. Rhem, American Forces Press Service

Washington, DC - Family members of Guard and Reserve personnel called to active duty for more than 30 days are eligible for TRICARE benefits the day their military sponsor mobilizes.

President Bush authorized the Defense Department to mobilize up to 50,000 National Guard and Reserve members to deal with the aftermath of the Sept. 11 terrorist attacks at the Pentagon and in New York City. DoD officials have indicated they intend initially to call up about 35,000.

The type of TRICARE coverage reserve component family members receive depends on the length of the sponsors' activation orders, Air Force Col. Kathleen Woody said.

Woody, a full-time reservist, is director of medical readiness and programs in the Office of the Assistant Secretary of Defense for Reserve Affairs.

Woody said Guard and Reserve members who are activated receive the same individual healthcare as their active duty counterparts. Coverage for their families, though, can take many different forms.

Guard and Reserve families are ineligible for DoD medical benefits if their military sponsors have orders that call them to duty for 30 days or less.

If sponsors have orders to active duty for more than 30 days, their families are covered under the TRICARE Extra or Standard programs from the day the member is activated, Woody said. While these family members would be eligible for space-available care in any military medical treatment facility, Woody, who is a nurse, cautioned that available space is limited and suggested using it only for an emergency.

"You want to have them in a program with some continuity with the providers," she said.

Eligible family members pay deductibles and cost-shares under both TRICARE Extra and Standard, Woody explained. Using a TRICARE Extra network provider can minimize those costs. Beneficiaries can get information on finding network providers in their area on the TRICARE Web site at www.tricare.osd.mil, or at their local TRICARE service center.

In addition, family members of reservists and guardsmen activated under orders for 179 days or more have the option to enroll in TRICARE Prime, the military's version of a health maintenance organization. They will receive care in a military medical treatment facility or be assigned to a network provider in their area with no cost-shares or deductibles.

"TRICARE Prime is the only one of the TRICARE options that requires pre-enrollment on the part of the family members," Woody said. Enrollment information can also be found on the TRICARE Web site or by contacting a local TRICARE benefits counselor. "Enrollment has to occur by the 20th of the month in order to be eligible for care on the 1st of the following month."

For instance, reserve component members who might be mobilized in coming weeks must have their enrollment forms in to TRICARE by Oct. 20 in order for their families to start receiving care on Nov. 1 under the Prime option, she explained. The family would be covered under TRICARE Standard

or Extra until enrolled in Prime.

She said the most important thing for all reserve component members to do is make sure all the information in the Defense Enrollment Eligibility Reporting System is accurate, Woody said. Since DEERS is the system used to determine eligibility for military health care, family members could be denied care if DEERS information is incorrect or incomplete.

Activated reservists are given a chance to review and make changes to their families' DEERS enrollments during the mobilization process, Woody said.

In cases where service members are activated for contingency operations, they and their family members are eligible to retain their military medical benefits for up to 30 days after they're released from active duty, unless sooner covered by an employer sponsored health care plan.

"This gives them a cushion to get civilian healthcare coverage in place," Woody said.

Reserve Affairs has set up a family readiness Web site at www.defenselink.mil/ra/html/family.htm

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MN013810. HealthWatch: Helping Kids Cope With Catastrophes
By LCDR Scott Clements, MC, Naval Hospital Pensacola

The recent tragic events in New York and Washington, D.C., frighten all of us. Many children have trouble keeping such events in perspective, and properly relating the violence to their lives.

Parents should be aware of how their children are reacting to the catastrophe and be ready to talk with them. Mental health experts suggest several means to help children in times of crisis.

Children need to be told they are safe. When violence is seen on television and heard on radios, some children may not be aware of the isolated nature of events. They may fear for their safety. Reassurance is essential. Children also need to be given the freedom to talk about feelings and thoughts.

Children need help in understanding the meaning of the events. In the case of the recent terrorist attacks, children should be helped to understand that these acts are not a reflection of a particular religion or ethnic group. Parents can help children to realize that terrorist acts are due to hate and aimed at causing fear and horror.

Repeated watching of violent or traumatic events on the television should be avoided. Some children may not have the coping skills to put events in their proper place or realize that replays of events are really one event being shown over and over. Parents should monitor what their children see on television and talk with them about what has happened.

A child's age will greatly affect the response to catastrophes. Younger children may become fearful and refuse to go to school. Adolescents in particular may have trouble during traumatic events. Parents should be alert for behavioral changes, sleep disturbances, apathy or marked fatigue.

The chance a child may experience greater difficulties in dealing with traumatic events is directly related to how close a child is to the event. More severe difficulties may be anticipated when death or destruction occurs to family or friends. Symptoms of problems, which may need professional advice or intervention, include:

- - Refusal to attend school
- Clinging behavior or shadowing a parent around the house
- - Nightmares, screaming during sleep, or other sleep disturbances that persist more than a few days after the event
- - New difficulty concentrating and irritability

- - New behavior problems or "acting out" problems
- - Physical complaints for which a physical cause cannot be found
- - Withdrawal from family or friends, loss of desire to play
- - Preoccupation with the traumatic events

Parents who have concerns that their child may be seriously affected should seek professional assistance from their doctor.

(CDR (Sel) Clements, MC, is a board-certified pediatrician at Naval Hospital Pensacola.)

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